

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 23, 2008 8:00 am**  
**Secretary of State**

04-23-2008 90035 019 \*\*\*\*75.00

**DOCUMENT # N07000006887**

1. Entity Name

ST. PHILOMENA BAPTIST CHURCH INC.



Principal Place of Business

7738 TOUCAN DR  
ORLANDO FL 32822

Mailing Address

7738 TOUCAN DR  
ORLANDO FL 32822



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

Applied For

☒ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REYES, ANTONIA  
7738 TOUCAN DR  
ORLANDO FL 32822

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution.

☒

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P  
NAME REYES, ANTONIA  
STREET ADDRESS 7738 TOUCAN DR.  
CITY- ST- ZIP ORLANDO FL 32822 ☐ Delete

TITLE VP  
NAME SPENCER, DELORESE  
STREET ADDRESS 7738 TOUCAN DR  
CITY- ST- ZIP ORLANDO FL 32822 ☐ Delete

TITLE T  
NAME YOKE, DESLYN  
STREET ADDRESS 7738 TOUCAN DR.  
CITY- ST- ZIP ORLANDO FL 32822 ☐ Delete

TITLE S  
NAME SPENCER, JAMALA  
STREET ADDRESS 7738 TOUCAN DR  
CITY- ST- ZIP ORLANDO FL 32822 ☐ Delete

TITLE ASSS  
NAME CLIFFORD, MRYTLE  
STREET ADDRESS 7738 TOUCAN DR  
CITY- ST- ZIP ORLANDO FL 32822 ☐ Delete

TITLE ASST  
NAME SPENCER, DELORES  
STREET ADDRESS 7738 TOUCAN DR  
CITY- ST- ZIP ORLANDO FL 32822 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
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CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Antonio Reyes*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-04-08